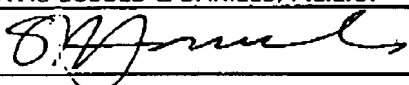
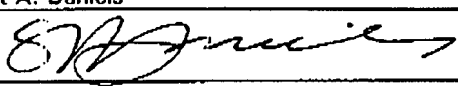


PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0851-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/529,996
	Filing Date	with an effective filing date of October 11, 2003
	First Named Inventor	Olaf LANGWALD
	Group Art Unit	3681
	Examiner Name	Richard M. LORENCE Fax: (571) 273-8300
Total No. of Pages in this Submission: 14	Attorney Docket Number	ZAHFRI P731US
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
REMARKS		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Scott A. Daniels DAVIS BUJOLD & DANIELS, P.L.L.C. <div style="text-align: right;">Reg. No. 42,462 CUSTOMER NO. 020210</div>	
Signature		
Date	May 25, 2007	
CERTIFICATE OF TRANSMISSION		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO on May 25, 2007.		
Type or printed name	Scott A. Daniels	
Signature	 <div style="text-align: right;">Date: May 25, 2007 (tac)</div>	

PATENT APPLICATION RECEIVED
CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MAY 25 2007

In re Application of : Olaf LANGWALD
Serial no. : 10/529,996
Filed : with an effective filing date of October 11, 2003
For : ACTUATING DEVICE FOR A CLUTCH
Group Art Unit : 3681
Examiner : Richard M. LORENCE
Docket : ZAHFRI P731US

The Commissioner for Patents
U.S. Patent & Trademark Office
P. O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

Dear Sir:

[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS RESPONSE.

In response to the official action mailed February 28, 2007, please enter the following before reconsideration of this application.

In the Specification:

Please amend paragraphs 008 and 021 of the specification as follows in which the specification additions are shown by underlining and the specification deletions are shown by strikeout. Please enter the replacement specification paragraphs into the record of this case.

In the Claims:

Please amend claims 11 and 19, cancel claims 14 and 15, and add new claims 20-24 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the new and amended claims into the record of this case.